

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

ADDRESS (number and street)

1800 North Kent Street

Suite 1070

☐Check if different  
than previously  
reported. (ACC)

Arlington

VA

22209

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332296

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☒

Special (12G)

Election on

11

03

2009

in the  
State of

NY

(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the  
State of☐

5. Covering Period

07

01

2009

through

10

14

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Frank Cannon

Signature of Treasurer

Electronically Filed by Frank Cannon

Date

10

22

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 20

Write or Type Committee Name

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	4	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		132051.35
(b) Cash on Hand at Beginning of Reporting Period .....	31518.77	
(c) Total Receipts (from Line 19) .....	9143.92	9278.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	40662.69	141330.27
7. Total Disbursements (from Line 31) .....	2898.55	103566.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	37764.14	37764.14
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

4 / 20

Write or Type Committee Name

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
1	0	0	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2250.00	2250.00
(ii) Unitemized .....	6893.92	7028.92
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9143.92	9278.92
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9143.92	9278.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9143.92	9278.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9143.92	9278.92

## DETAILED SUMMARY PAGE

of Disbursements

5 / 20

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	398.55	1082.45	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	398.55	1082.45	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	3125.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	-261.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	-261.00	
29. Other Disbursements.....	0.00	99619.68	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2898.55	103566.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2898.55	103566.13	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 20

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	9143.92	9278.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	-261.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9143.92	9539.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	398.55	1082.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	398.55	1082.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Joanne M. Aarseth

Mailing Address 20840 Miranda Falls Square

City

Sterling

State

VA

Zip Code

20165-2482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Freddie Mac

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: A9899271944B1F3C9BB

Amount of Each Receipt this Period

75.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**B.**

Full Name (Last, First, Middle Initial)

Bill Blatty

Mailing Address 7018 Longwood Drive

City

Bethesda

State

MD

Zip Code

20817-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 101909-88

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Felix Conry

Mailing Address 150 Stroud Avenue

City

Staten Island

State

NY

Zip Code

10312-3244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 101909-110

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Peter E. Dans

Mailing Address 11 Hickory Hill Road

City

Cockeysville

State

MD

Zip Code

21030-1624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 9

Transaction ID: 004876EC224522D5F1B

Amount of Each Receipt this Period

25.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**B.**

Full Name (Last, First, Middle Initial)

Allen Dickson

Mailing Address PO Box 5845

City

Shreveport

State

LA

Zip Code

71135-5845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morris and Dickson

Occupation

Wholesaler (retired)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 9

Transaction ID: 58665922BF3A2F3458F

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**C.**

Full Name (Last, First, Middle Initial)

William Guyol

Mailing Address 24 York Hills Drive

City

Saint Louis

State

MO

Zip Code

63144-1058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: A452D1CE09168A25A63

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Tony Hensley

Mailing Address 1651 Challenge Drive

City

Concord

State

CA

Zip Code

94520-5206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 9

Transaction ID: 101909-11

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Robert J. Kania, Jr.

Mailing Address 1616 Cook School Road

City

Upper St. Clair

State

PA

Zip Code

15241-2606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 0 9

Transaction ID: 57513F8D9E1801A08AE

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**C.**

Full Name (Last, First, Middle Initial)

Mary Kohler

Mailing Address PO Box 897

City

Sheboygan

State

WI

Zip Code

53082-0897

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Windway Capital Corp.

Occupation

Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 0 9

Transaction ID: 64945B7D9A14C3E323F

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

Earmarked for Doug Hoffman  
for Congress

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Terry Kohler

Mailing Address PO Box 897

City

Sheboygan

State

WI

Zip Code

53082-0897

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Windway Capital Corp.

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	9

Transaction ID: D39A3A701431737EAEC

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**Earmarked for Doug Hoffman  
for Congress**B.**

Full Name (Last, First, Middle Initial)

Raymond Lauring

Mailing Address 23 Brigham Road

City

Worcester

State

MA

Zip Code

01609-1005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Transaction ID: B503F4B87811B8C5E28

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**Earmarked for Doug Hoffman  
for Congress**C.**

Full Name (Last, First, Middle Initial)

Francis Lieuwen

Mailing Address 5332 Springdale Road

City

Cincinnati

State

OH

Zip Code

45251-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	7	/	2	0	0	9

Transaction ID: 87AA0826C1C3AD646A9

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

John Murnane

Mailing Address 10 Marian Place

City

Millwood

State

NY

Zip Code

10546-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fitzpatrick, Cella, Harper  
and ScintoOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Transaction ID: 644D4410C0255779180

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**Earmarked for Doug Hoffman  
for Congress**B.**

Full Name (Last, First, Middle Initial)

Susan O'Rourke

Mailing Address 229 Southeast Villas Street

City

Stuart

State

FL

Zip Code

34994-3432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Transaction ID: 101909-43

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Grace Sundry

Mailing Address 45 Fordyce Manor Court

City

Lake Saint Louis

State

MO

Zip Code

63367-1800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	9

Transaction ID: F57EA3D3D5282ADEF9F

Amount of Each Receipt this Period

200.00

**[MEMO ITEM]**Earmarked for Doug Hoffman  
for Congress

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Michael Walker

Mailing Address 7354 Ardglass Drive

City

Lorton

State

VA

Zip Code

22079-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	9	

Transaction ID: 101909-59

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

2250.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City  
Spokane

State  
WA

Zip Code  
99213-3305

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: V1D93D588098990B7A58

Date of Disbursement

07 / 03 / 2009

Amount of Each Disbursement this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City  
Spokane

State  
WA

Zip Code  
99213-3305

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: V26ECDE80C81351AB137

Date of Disbursement

07 / 03 / 2009

Amount of Each Disbursement this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Merchant e-Solutions

Mailing Address P.O. Box 13305

City  
Spokane

State  
WA

Zip Code  
99213-3305

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: V17FCE7AE1D5B979E00A

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

35.00

**SUBTOTAL** of Disbursements This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant e-Solutions	<b>Transaction ID:</b> VED28125F6844A3389B2 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
City Spokane State WA Zip Code 99213-3305	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>	35.00																			
35.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Merchant e-Solutions	<b>Transaction ID:</b> V4153FA4233259CFFDB3 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	9												
City Spokane State WA Zip Code 99213-3305	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>	35.00																			
35.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant e-Solutions	<b>Transaction ID:</b> VBFD5D544C593D978120 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 13305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	9												
City Spokane State WA Zip Code 99213-3305	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>	35.00																			
35.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**105.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Merchant e-Solutions</p> <p>Mailing Address P.O. Box 13305</p> <p>City Spokane State WA Zip Code 99213-3305</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VA6E43AF6A2D532C9864</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Merchant e-Solutions</p> <p>Mailing Address P.O. Box 13305</p> <p>City Spokane State WA Zip Code 99213-3305</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> VDC2910642782571F917</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ning</p> <p>Mailing Address 735 Emerson St.</p> <p>City Palo Alto State CA Zip Code 94301</p> <p>Purpose of Disbursement Website Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> V0D2C6F821F98A3A52B5</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.85"/></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <input type="text" value="102.85"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <input type="text"/></p>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Ning

Mailing Address 735 Emerson St.

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement  
Website Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: V21A7EDABE11F8CD49CC

Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

32.85

**B.**

Full Name (Last, First, Middle Initial)

Ning

Mailing Address 735 Emerson St.

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement  
Website Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: V6B91BA044ECB56E2965

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

32.85

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

65.70

**TOTAL** This Period (last page this line number only) ..... ►

378.55



	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

FEC Schedule B ( Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Doug Hoffman for Congress

Mailing Address 2000 Saranac Avenue

City	State	Zip Code
Lake Placid	NY	12946

Purpose of Disbursement  
Transmitted by Contributor's Original Check

011

Category/  
TypeCandidate Name  
Douglas L. HoffmanOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: B7513F8D9E1801A08AE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**

Earmarked by Robert Kania

**B.**

Full Name (Last, First, Middle Initial)

Doug Hoffman for Congress

Mailing Address 2000 Saranac Avenue

City	State	Zip Code
Lake Placid	NY	12946

Purpose of Disbursement  
Transmitted by Contributor's Original Check

011

Category/  
TypeCandidate Name  
Douglas L. HoffmanOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: B57EA3D3D5282ADEF9F

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**

Earmarked by Mary Sundy

**C.**

Full Name (Last, First, Middle Initial)

Doug Hoffman for Congress

Mailing Address 2000 Saranac Avenue

City	State	Zip Code
Lake Placid	NY	12946

Purpose of Disbursement  
Transmitted by Contributor's Original Check

011

Category/  
TypeCandidate Name  
Douglas L. HoffmanOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: B04876EC224522D5F1B

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

Earmarked by Peter Dans

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Doug Hoffman for Congress	<b>Transaction ID:</b> B504F4B87811B8C5E28 <b>Date of Disbursement</b>																				
Mailing Address 2000 Saranac Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	9												
City Lake Placid State NY Zip Code 12946	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Douglas L. Hoffman	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011	<b>[MEMO ITEM]</b> Earmarked by Raymond Laur-ing																				
<b>B.</b> Full Name (Last, First, Middle Initial) Doug Hoffman for Congress	<b>Transaction ID:</b> B8665922BF3A2F3458F <b>Date of Disbursement</b>																				
Mailing Address 2000 Saranac Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	9												
City Lake Placid State NY Zip Code 12946	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Douglas L. Hoffman	<table border="1"> <tr> <td colspan="10">2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011	<b>[MEMO ITEM]</b> Earmarked by Allen Dickson																				
<b>C.</b> Full Name (Last, First, Middle Initial) Doug Hoffman for Congress	<b>Transaction ID:</b> B4945B7D9A14C3E323F <b>Date of Disbursement</b>																				
Mailing Address 2000 Saranac Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	9												
City Lake Placid State NY Zip Code 12946	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transmitted by Contributor's Original Check Candidate Name Douglas L. Hoffman	<table border="1"> <tr> <td colspan="10">2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011	<b>[MEMO ITEM]</b> Earmarked by Mary Kohler																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"> <tr> <td colspan="10">0.00</td> </tr> </table>	0.00																			
0.00																					
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

**A.**

Full Name (Last, First, Middle Initial)

Doug Hoffman for Congress

Mailing Address 2000 Saranac Avenue

City	State	Zip Code
Lake Placid	NY	12946

Purpose of Disbursement  
Transmitted by Contributor's Original CheckCandidate Name  
Douglas L. Hoffman

011
Category/ Type

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: B39A3A701431737EAEC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

Amount of Each Disbursement this Period

2400.00

**[MEMO ITEM]**

Earmarked by Terry Kohler

**B.**

Full Name (Last, First, Middle Initial)

Doug Hoffman for Congress

Mailing Address 2000 Saranac Avenue

City	State	Zip Code
Lake Placid	NY	12946

Purpose of Disbursement  
Transmitted by Contributor's Original CheckCandidate Name  
Douglas L. Hoffman

011
Category/ Type

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: B452D1CE09168A25A63

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	9

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**

Earmarked by William Guyol

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

2500.00